

Information Collection
Underground Injection Control (UIC) Class V Well Study
Agricultural Drainage Wells

U.S. Environmental Protection Agency
Washington, DC 20460

NOTE: If there is a more appropriate person to complete this questionnaire, please forward it.

Please provide missing information and/or update the contact information provided below.

	Contact
State:	
Name of Contact:	
Name of Agency:	
Street Address:	
City, State Zip:	
Phone Number:	
E-mail Address:	

If you have any questions or need assistance filling out this questionnaire, please contact:

Class V Coordinator
(703) 931-8700

EPA is required to collect this information as part of its consent decree with the Sierra Club, which was amended in 1997. EPA is authorized to collect this information under § 1421 of the SDWA, 42 USC §300h. Responses to this collection are voluntary. The public reporting and recordkeeping burden for this collection of information is estimated to average 2 hours per response. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations are listed in 40 CFR Part 9 and 48 CFR Chapter 15. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, OPPE Regulatory Information Division • U.S. Environmental Protection Agency (2137) • 401 M St., S.W. • Washington, D.C. 20460 • ; and to the Office of Information and Regulatory Affairs, Office of Management and Budget • 725 17th Street, N.W. • Washington, D.C. 20503 • Attention: Desk Officer for EPA. • Include the EPA ICR number and OMB control number in any correspondence. Do not send the completed form to this address.

Information Collection on Agricultural Drainage Wells

DEFINITION: Agricultural drainage wells include all wells receiving agricultural runoff. This includes improved sinkholes and abandoned drinking water wells receiving agricultural runoff, wells that recharge aquifers with agricultural tail waters, and wells used to drain flood irrigation.

We are only asking you to submit data that has already been collected by the State and is readily available. Please answer the following questions to the extent possible based on existing data.

1. Regulations

EPA is obtaining regulations from the State Underground Injection Control (UIC) program. If agricultural drainage wells in the State are regulated under a separate statute or regulation, please provide the citation(s) below or attach appropriate copies. **9** Check if attached.

2. Number of Agricultural Drainage Wells

2a. Indicate the number of agricultural drainage wells that can be documented in the State (excluding wells that have been permanently plugged and abandoned): _____

2b. In your judgement, does the number given in 2a accurately reflect the number of wells in the State?

9 Yes **Y** Go to Question 3.

9 No

2c. Please estimate the number of wells in the State (excluding wells that have been permanently plugged and abandoned): _____

2d. What is the source of the estimate given in 2c (e.g., survey, model, best professional judgement)?

Please explain the methodology used to derive the estimate.

3. Location of Agricultural Drainage Wells

Please provide the location of each agricultural drainage well in your inventory. We prefer latitude and longitude coordinates (a). If that information is not available, provide other location information such as zip code (b), county (c), Quarter/Section/Township/Range (Q/S/T/R) coordinates, or other identifying information (d). If you have a database containing this information, you may submit this information in any format that is convenient for you instead of completing the following table. If completing the table or submitting information will be extremely time consuming or financially burdensome, please contact the Class V coordinator (see cover page). Please copy this page if you need additional lines.

One well per line please.

Unique well identifier (e.g., permit no., operator name)	PLEASE COMPLETE (a), (b), (c), OR (d). WE PREFER (a).				
	(a) Latitude/ Longitude (to minutes)		(b) Zip Code	(c) County Name	(d) Other Location Information (e.g., Q/S/T/R, UTM)
	Latitude	Longitude			

4. Please indicate the areas (e.g., counties, towns) in the State where agricultural drainage wells are suspected to exist but have not been inventoried.

5. Do agricultural drainage wells in the State typically serve to:

☐ Drain seasonally wet soils (non-irrigated).

☐ Drain excess irrigation water.

☐ Other. Please explain. _____

6. What is the typical configuration of the wells (e.g., dimensions, depth, subsurface or surface intakes)?

Please provide diagrams or a description.

☐ Check if diagram(s) or description(s) attached.

7. Does the State have construction or siting requirements for these wells?

☐ Yes ☐ Please describe briefly below or attach appropriate information. ☐ Check if information attached.

☐ No ☐ Go to Question 9.

8. Does the State conduct inspections or review records to ensure that construction/siting requirements are met?

9 Yes ☒ Please describe briefly below.

9 No ☐

9. Does the State have operating requirements (e.g., contaminant limits, monitoring requirements, best management practices (BMPs))?

9 Yes ☒ Please describe briefly below, or attach appropriate information. 9 Check if information attached.

9 No ☐ Go to Question 11

10. Does the State conduct inspections or review records to ensure that operating requirements are met?

9 Yes ☒ Please describe briefly below.

9 No ☐

11. To your knowledge, what types of BMPs are used in the State, and how widely is each used?

12. Are you aware of studies that examine the effectiveness of BMPs for agricultural drainage wells?

☐ Yes ☒ Please provide a citation for each study below or attach a copy. ☐ Check if copy attached.

☐ No

13. Are you aware of studies of ground water quality to assess the impact of agricultural drainage wells on Underground Sources of Drinking Water (USDWs)?

☐ Yes ☒ Please provide a citation for each study below or attach a copy. ☐ Check if copy attached.

☐ No

14. Have there been incidents in the State in which an agricultural drainage well contributed to contamination of a USDW? Contamination can include exceedances of Federal or State drinking water standards, ground water standards, or health advisory levels.

☒ Yes ☒ If a study or description of the incident exists, please provide us a copy. If not, please provide a brief summary for each incident. To the extent this information is available, include a description of what happened, the impact on ground water quality or drinking water wells (public or private), the date of the incident, the name of the city or county in which the incident occurred, and the name and phone number of a contact for follow up. ☐ Check if description(s) attached.

☐ No

☐ Don't Know

Please Go To Page 6 and Complete the Additional Contacts Section.

Additional Contacts

Please list individuals that could help answer our questions on agricultural drainage wells. Include individuals from other State programs, local programs, or institutions such as universities, as appropriate.

Name/Title: _____	Name/Title: _____
Affiliation: _____	Affiliation: _____
Street Address: _____ _____	Street Address: _____ _____
Telephone Number: _____	Telephone Number: _____

Thank you for your assistance.

Please remember to:

☐ Attach appropriate information.

☐ Return this questionnaire

In the pre-paid Federal Express envelope to:
Class V Study Coordinator
4900 Seminary Road
Suite 600
Alexandria, VA 22311

By fax to:
Class V Study Coordinator
(703) 931-8701